

**Erma Byrd Higher Education Center
Beaver, West Virginia
(Use ONLY for transfers between institutions at the HEC)**

TRANSIENT/SPECIAL STUDENT ADMISSIONS FORM

All students at the Public Higher Education Center desiring to enroll in undergraduate courses offered through an institution other than their home institution must complete a Transient Form. Please consult the Transfer Articulation Guide to determine the transferability of the course desired.

Home Institution: _____ Transient Institution: _____

Enrollment Period: (Spring), Year _____ (Summer), Year _____ (Fall), Year _____

Demographic Information

Last Name, First Name, MI: _____ Social Security Number: _____

Mailing Address
Street: _____ Date of Birth: _____ Sex: Male ___ Female ___

City, State, Zip: _____ Home Telephone: _____ US Citizen: Yes ___ No ___

High School Name: _____ Graduation Year or GED Date: _____

Have you attended the Transient Institution before? Yes ___ No ___ If yes, last semester attended: _____

Are you applying as a legal resident of West Virginia? Yes ___ No ___ Home County: _____

State or foreign country of legal residence _____ Length of time at current residence: _____

Ethnic Background: White ___ Black ___ Hispanic ___ Asian/Pacific Islander ___ Amer Indian/Alaskan Native ___ Non-Resident Alien ___

The above named student is hereby authorized to enroll at your institution for the course (s) listed below during the period specified.

Transient Course (s)

Home Institution Equivalent Course (s)

Dept.	Course No.	Title	Sem. Hrs.	Dept.	Course No.	Title	Sem. Hrs.

In submitting this form, I understand and agree to the following limitations: 1. I must have a transcript of this work sent from the Transient Institution to my Home Institution; 2. the grade (s) and quality points earned at the Transient Institution will be transferred to my Home Institution; 3. my total course load for the semester indicated, including the courses listed above, does not exceed 18 semester hours; 4. I have met all prerequisites for the equivalent course (s) listed above at my Home Institution.

Student Signature: _____ Date: _____

Home Institution Advisor or Designee Signature: _____ Date: _____

Home Institution Registrar Signature: _____ Date: _____

